

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571) 273-2885

or Fax

(571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

000110 7590 09/20/2005

DANN, DORFMAN, HERRELL & SKILLMAN
1601 MARKET STREET
SUITE 2400
PHILADELPHIA, PA 19103-2307

12/23/2005 HVUONG2 00000080 09676363

01 FC:2501 700.00 OP
02 FC:8001 30.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

ROBIN DOLAN (Depositor's name)
Robin Dolan (Signature)
December 20, 2005 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/676,363 | 09/29/2000 | Brian W. Loggie | | 2200 |

TITLE OF INVENTION: MULTI-LUMEN CATHETER SYSTEM USED IN A BLOOD TREATMENT PROCESS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES | \$700 | \$0 | \$700 | 12/20/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------------|----------|----------------|
| DEAK, LESLIE R | 3761 | 604-008000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Donald R. Piper, Jr.
2. Dann, Dorfman, Herrell
3. + Skillman, P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Wake Forset University Health Sciences Winston-Salem, NC

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name

Niels Haun


Date

Registration No.

Dec. 20, 2005
48,488

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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| | |
|--|--|
|  | Complete if known |
| | Application Number: 09/676,363 |
| | Filing Date: September 29, 2000 |
| | First Named Inventor: Loggie |
| | Group Art Unit: 3762 |
| Examiner Name: Deak, L. | |
| Total Amt. of Payment: (1)+(2)+(3)= \$730 | Attorney Docket Number: 0101-P01578US3 |

| METHOD OF PAYMENT (check one) | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|-----------------|---------------|-----------------------------------|-----------------|--|--------------------|---|-------------------|--|------------------|---|--------------------|--|------------------------|------------------|---------------------|--|---|--------------------------|-------|--|--------------|--|-------|--------------------|-----|-------------------------------|--|---|-------|--|-------|---|-------|--|----|---------------------------|-------|---------------------|--------------|
| <p>1. The Commissioner is hereby authorized to:</p> <p><input type="checkbox"/> Charge indicated fees</p> <p><input checked="" type="checkbox"/> Charge additional fees</p> <p><input checked="" type="checkbox"/> Credit overpayments</p> <p style="padding-left: 40px;">to the account of DANN, DORFMAN, HERRELL & SKILLMAN</p> <p style="padding-left: 40px;">Deposit Account Number <u>04-1406</u></p> <p>2. Payment enclosed:</p> <p style="text-align: right; padding-right: 50px;">Check in the amount of <u>\$730</u></p> | <table border="0" style="width: 100%;"> <tr> <th style="text-align: left; padding: 5px;">Fee Description</th> <th style="text-align: right; padding: 5px;">Fee Paid</th> </tr> <tr><td style="padding: 5px;">Surcharge-late filing fee or oath</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Surcharge - late provisional filing fee or cover sheet</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Extension for response within first month</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Extension for response within second month</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Extension for response within third month</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Extension for response within fourth month</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Notice of Appeal</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Filing a brief in support of an appeal</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Request for oral hearing</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Petition to revive unavoidably abandoned application</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Petition to revive unintentionally abandoned application</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Issue fee</td><td style="text-align: right; padding: 5px;">700</td></tr> <tr><td style="padding: 5px;">Petitions to the Commissioner</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Petitions related to provisional applications</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Submission of Information Disclosure Stmt.</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Recording each patent assignment per property</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Other fee (specify) <u>Advance Order (10 copies)</u></td><td style="text-align: right; padding: 5px;">30</td></tr> <tr><td style="padding: 5px;">Other fee (specify) _____</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr> <td style="text-align: right; padding: 5px;">SUBTOTAL (3)</td> <td style="text-align: right; padding: 5px;">\$730</td> </tr> </table> | Fee Description | Fee Paid | Surcharge-late filing fee or oath | _____ | Surcharge - late provisional filing fee or cover sheet | _____ | Extension for response within first month | _____ | Extension for response within second month | _____ | Extension for response within third month | _____ | Extension for response within fourth month | _____ | Notice of Appeal | _____ | Filing a brief in support of an appeal | _____ | Request for oral hearing | _____ | Petition to revive unavoidably abandoned application | _____ | Petition to revive unintentionally abandoned application | _____ | Issue fee | 700 | Petitions to the Commissioner | _____ | Petitions related to provisional applications | _____ | Submission of Information Disclosure Stmt. | _____ | Recording each patent assignment per property | _____ | Other fee (specify) <u>Advance Order (10 copies)</u> | 30 | Other fee (specify) _____ | _____ | SUBTOTAL (3) | \$730 |
| Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surcharge-late filing fee or oath | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surcharge - late provisional filing fee or cover sheet | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for response within first month | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for response within second month | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for response within third month | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for response within fourth month | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Notice of Appeal | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Filing a brief in support of an appeal | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Request for oral hearing | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Petition to revive unavoidably abandoned application | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Petition to revive unintentionally abandoned application | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Issue fee | 700 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Petitions to the Commissioner | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Petitions related to provisional applications | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Submission of Information Disclosure Stmt. | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Recording each patent assignment per property | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) <u>Advance Order (10 copies)</u> | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) _____ | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (3) | \$730 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="0" style="width: 100%;"> <tr> <th style="text-align: left; padding: 5px;">FEE CALCULATION</th> <th style="text-align: right; padding: 5px;">Fee</th> </tr> <tr><td style="padding: 5px;">1. FILING FEE</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Fee Description</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Utility filing fee</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Design filing fee</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Plant filing fee</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Reissue filing fee</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr><td style="padding: 5px;">Provisional filing fee</td><td style="text-align: right; padding: 5px;">_____</td></tr> <tr> <td style="text-align: right; padding: 5px;">SUBTOTAL (1)</td> <td style="text-align: right; padding: 5px;">\$0</td> </tr> </table> | FEE CALCULATION | Fee | 1. FILING FEE | _____ | Fee Description | _____ | Utility filing fee | _____ | Design filing fee | _____ | Plant filing fee | _____ | Reissue filing fee | _____ | Provisional filing fee | _____ | SUBTOTAL (1) | \$0 | <p>2. Claims</p> <table border="0" style="width: 100%;"> <tr> <th style="text-align: left; padding: 5px;">Paid</th> <th style="text-align: left; padding: 5px;">Extra</th> <th style="text-align: left; padding: 5px;">Fee</th> </tr> <tr> <td style="padding: 5px;">Total Claims</td> <td style="padding: 5px;">=</td> <td style="text-align: right; padding: 5px;">0</td> </tr> <tr> <td style="padding: 5px;">Independent Claims</td> <td style="padding: 5px;">x</td> <td style="text-align: right; padding: 5px;">0</td> </tr> <tr> <td style="padding: 5px;">Multiple Dependent (First presentation)</td> <td></td> <td></td> </tr> <tr> <td style="text-align: right; padding: 5px;">SUBTOTAL (2)</td> <td></td> <td style="text-align: right; padding: 5px;">_____</td> </tr> </table> | Paid | Extra | Fee | Total Claims | = | 0 | Independent Claims | x | 0 | Multiple Dependent (First presentation) | | | SUBTOTAL (2) | | _____ | | | | | | | |
| FEE CALCULATION | Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. FILING FEE | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Description | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Utility filing fee | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Design filing fee | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Plant filing fee | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Reissue filing fee | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Provisional filing fee | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) | \$0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Paid | Extra | Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims | = | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims | x | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent (First presentation) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) | | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Submitted By:

Typed or

Printed Name Melissa Hahn

Signature 

Reg. Number 48,488

Date December 20, 2005

Deposit Account User ID

04-1406

DANN, DORFMAN, HERRELL AND SKILLMAN

A PROFESSIONAL CORPORATION

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PHONE (215) 563-4100 • FAX (215) 563-4044



December 20, 2005

Last Name of First Named Inventor:

LOGGIE

MAIL STOP ISSUE FEE

Application No. 09/676,363

Allowed: September 20, 2005

Attorney Docket No. 0101-P01578US3

Filed: September 29, 2000

For: Multi-Lumen Cathether System
Used In A Blood Treatment Process

TO THE COMMISSIONER FOR PATENTS:

SUBMISSION OF ISSUE FEE

The above-identified application has been allowed. In response to the Notice of Allowability dated September 20, 2005, enclosed are the following:

1. A copy of form PTOL-85 with authorization to charge Deposit Account No. 04-1406.
2. Check in the amount of \$730, which includes the issue fee and the cost of ten (10) advance copies.

Respectfully submitted,

DANN, DORFMAN, HERRELL AND SKILLMAN
A Professional Corporation
Attorneys for Applicants

By


Mels Haun

PTO Registration No. 48,488